|   |   | RPLICATION                       |                  |                                  |                              | N RECC                           | ORD     |                |                                       |         |                     |                            |
|---|---|----------------------------------|------------------|----------------------------------|------------------------------|----------------------------------|---------|----------------|---------------------------------------|---------|---------------------|----------------------------|
|   | 3.2.6   | Mile July                        | ve Octobe        | 1-                               | 00                           |                                  |         | 1911           | WW.                                   | -+      |                     | ***                        |
|   |   | CLAIMS AS                        | FILED - F        |                                  | (Coluñ                       | nn 2)                            |         | MALL EN        | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | OR      | OTHER<br>SMALL E    | THAN"                      |
| <u>io</u>   | TAL CLAIMS  | ALGUAIMS                         |                  |                                  |                              |                                  |         | RATE           | FEE                                   |         | RATE                | FEE                        |
| FO  | 3   |                                  | NUMBER FILED     |                                  | NUMBER EXTRA                 |                                  | 数型      | BASIC FEE      | 355.00                                | OR      | BASIC FEE           | 710.00                     |
| TOT   | VALGHARGEABLE CLAIMS minus 20=  |                                  |                  | ıs 20=                           |                              |                                  |         | X\$ 9=         | 1.<br>28                              | OR      | X\$18=              |                            |
|   | NDEPENDENT CLAIMS minus 3 =   |                                  |                  | us 3 =                           |                              |                                  |         | X40=           |                                       | OR      | X80=                |                            |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |                                  |                  |                                  |                              |                                  |         | +135=          | * .                                   | OR      | +270=               |                            |
| If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR TOTAL |   |                                  |                  |                                  |                              |                                  |         |                |                                       |         |                     |                            |
| CLAIMS AS AMENDED - PART II OTHER THAN  |   |                                  |                  |                                  |                              |                                  |         |                |                                       |         |                     |                            |
| (Column 2) (Column 3) SMALL ENTITY OR SM  |   |                                  |                  |                                  |                              |                                  |         |                |                                       | SMALL   |                     |                            |
| AMENDMENTA  |   | REMAINING<br>AFTER<br>AMENDMENT  |                  | HIGHI<br>NUME<br>PREVIO<br>PAIDA | BER<br>DUSLY/                | PRESENT<br>EXTRA                 |         | RATE           | ADDI-<br>TIONAL<br>FEE                |         | RATE                | ADDI-<br>TIONAL<br>FEE     |
| NDM   | Total   |                                  | Minus            | d                                | 5                            | =                                | ]       | X\$ 9=         |                                       | OR      | X\$18=              |                            |
| ME  | Independent   |                                  | Minus            | ***                              | 2.                           | -                                |         | X40=           |                                       | OR      | X80=                | 7                          |
|   | FIRST PRESE   | NTATION OF MU                    | ILTIPLE DEP      | ENDENT                           | CLAIM                        |                                  |         | +135=          |                                       | OR      | +270=               | 7                          |
|   |   |                                  |                  |                                  |                              |                                  |         | TOTAL          |                                       |         | TOTAL<br>ADDIT, FER |                            |
| ,   |   | (Column 1)                       |                  | (Colui                           | mn 2)                        | (Column 3                        |         | ADDIT. FEE     |                                       | 1       | ADDIT. FEE          |                            |
| m ·   |   | CLAIMS<br>REMAINING              | ·                | HIGH<br>NUM                      | IEST                         | PRESENT                          | 7       |                | ADDI-                                 |         | /                   | ADDI-                      |
| DMENT   |   | AFTER AMENDMENT                  |                  | PREVIO<br>PAID                   |                              | EXTRA                            |         | RATE           | TIONAL<br>FEE                         |         | RATE                | TIONAL<br>FEE              |
| ₩Q  | Total   | *                                | Minus            | **                               |                              | =                                |         | X\$ 9=         |                                       | OR      | X\$18=              |                            |
| AMEN  | Independent   | •                                | Minus            | ***                              |                              | =                                |         | X40=           |                                       | OR      | X80=                |                            |
|   | FIRST PRESE   | NTATION OF MU                    | JLTIPLE DEP      | PENDEN                           | CLAIM                        |                                  |         | +135=          |                                       | OR      | +270=               |                            |
|   |   |                                  |                  |                                  |                              |                                  |         | TOTAL          |                                       | OR      | TOTAL<br>ADDIT. FEE |                            |
|   | (Column 1) (Column 2) (Column 3)  |                                  |                  |                                  |                              |                                  |         | ADDIT. FEE     |                                       | 4       | AUDII. PEC          |                            |
| NT C  | :   | CLAIMS REMAINING AFTER AMENDMENT |                  | HIGH<br>NUM<br>PREVI             | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT                          | 7       | RATE           | ADDI-<br>TIONAL<br>FEE                |         | RATE                | ADDI-<br>TIONAL<br>FEE     |
|   | Total   | *                                | Minus            | **                               |                              | =                                |         | X\$ 9=         | <del></del>                           | OR      | X\$18=              | ï                          |
| AMENDMENT   | Independent   | *                                | Minus            | ***                              |                              | =                                |         | X40=           | <u> </u>                              | OR      | You                 |                            |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |                                  |                  |                                  |                              |                                  |         |                |                                       | 1       |                     |                            |
| .   | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                  |                  |                                  |                              |                                  |         | +135=<br>TOTAL |                                       | OR      | TOTAL               | <u> </u>                   |
|   | ' If the "Highest Nu  | ımber Previously P               | aid For" IN THI  | IS SPACE<br>IIS SPACE            | is less that<br>is less th   | an 20, enter "<br>an 3. enter "3 | 3."     | ADDIT. FEE     | L                                     | OR      | ADDIT. FEE          |                            |
| وسوا  | The Highest Nur   | mber Previously Pa               | id For" (Total c | or Indepen                       | dent) is th                  | e highest nur                    | mber fo | ound in the ar | propriate bo                          | ox in c | olumn 1.            | المراجعة المستحدث المستحدث |